Form **8871** (Rev. July 2003)

Political Organization Notice of Section 527 Status

OMB No. 1545-1693

Department of the Treasury Internal Revenue Service

Part I

General Information

10b If 'Yes,' list the state where the organization files reports: FL

P.O. Box 1779	
City or town, state, and ZIP code Tallahassee, FL 32302 - 3 Check applicable box: ✓ Initial notice — Amended notice — Final notice 4a Date established	
City or town, state, and ZIP code Tallahassee, FL 32302 - 3 Check applicable box: ✓ Initial notice — Amended notice — Final notice 4a Date established	
Tallahassee, FL 32302 - 3 Check applicable box: ✓ Initial notice — Amended notice — Final notice 4a Date established	
3 Check applicable box: ✓ Initial notice — Amended notice — Final notice 4a Date established 07/10/2013 5 E-mail address of organization rturner@FRLA.org	
4a Date established 07/10/2013 4b Date of material change 07/11/2013 5 E-mail address of organization rturner@FRLA.org	
07/10/2013 07/11/2013 5 E-mail address of organization rturner@FRLA.org	
5 E-mail address of organization rturner@FRLA.org	
rturner@FRLA.org	
6a Name of custodian of records 6b Custodian's address	
Bob Dearden P.O. Box 1779	
Tallahassee, FL 32302 -	
7a Name of contact person 7b Contact person's address	
Richard E. Turner P.O. Box 1779	
Tallahassee, FL 32302 -	
8 Business address of organization (if different from mailing address shown above). Number, street, and room or suite number	er
230 South Adams Street	
City or town, state, and ZIP code	
Tallahassee, FL 32301 -	
9a Election authority 9b Election authority identification number	
NONE	
Part II Notification of Claim of Exemption From Filing Certain Forms (see instructions)	
10a Is this organization claiming exemption from filing Form 8872, Political Organization Report of Contributions and Expendit	ures, as a
qualified state or local political organization? Yes ⊻ No	

11 Is this organization claiming exemption from filing Form 990 (or 990-EZ), Return of Organization Exempt from Income Tax, as a caucus or associations of state or local officials? Yes _ No ✓

Part III Purpose
12 Describe the purpose of the organization

To support or oppose statewide, legislative , multicounty or local candidates or issues

List of All Related Entities (see instructions) 13 Check if the organization has no related entities 14a Name of related entity 14b Relationship 14c Address Florida Restaurant & Lodging Association PAC Connected 230 South Adams Street No. 3 Tallahassee, FL 32301 -Florida Restaurant & Lodging Association Connected 230 South Adams Street Tallahassee, FL 32301 -Florida Restaurent & Lodging Association PAC, Connected 230 South Adams Street Tallahassee, FL 32301 -List of All Officers, Directors, and Highly Compensated Employees (see instructions) 15a Name 15b Title 15c Address Carol B. Dover Chairman P.O. Box 1779 Tallahassee, FL 32302 -P.O. Box 1779 Bob Dearden Treasurer Tallahassee, FL 32302 -Under penalties of perjury, I declare that the organization named in Part I is to be treated as a tax-exempt organization described in section 527 of the Internal Revenue Code, and that I have examined this notice, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that I am the official authorized to sign this report, and I am signing by entering my name Richard E. Turner 07/11/2013 Sign Name of authorized official

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